## February 22, 2011

Testimony of Carole Greenberg, LMFT Re: Senate Bill No. 981 - An Act Concerning the Placement of Young Children in Congregate Care Facilities

My name is Carole Greenberg and I am a former Public Health Nurse and am currently a Licensed Marriage and Family Therapist, practicing in Old Greenwich, CT. I have worked with Kids in Crisis professionally as well as serving on the Board.

I certainly approve of the commitment of DCF and the Committee to want to ensure the safety and well being of vulnerable children. We also know that children from the age of birth to 6 are at the greatest risk for developing subsequent problems when they are not provided with comprehensive physical and emotional care.

It would be ideal if every child has a safe, nurturing home but as we all know this does not exist. It would be ideal if there were enough safe, nurturing foster homes where children and their siblings can live together on a temporary basis but as we know this does not exist

The question is what happens when the home is no longer safe? When children are abused, abandoned or parents are incarnated or unable to care for their children. An emergency situation occurs when a child needs to be place immediately into a safe place.

This is where Kids In Crisis comes in. It was the first agency to establish a Crisis Nursery that has become a model of care for vulnerable children. A child who comes in immediately receives a complete medical evaluation to be followed, when needed, by an emotional and behavioral assessment. Medical as well as psychological care is provided on an ongoing basis. Many times this is not done immediately when kids are placed in foster homes resulting in inadequate placements.

Kids in Crisis staff are well trained and skilled in providing nurturing, care, and understand the need for consistency. Having more than one caregiver who is present on a regular basis is no different for kids who live with their family and go to school, day care, etc. It is the quality of the care that is critical. And finally, separating siblings can only increase the trauma and disruption in these children's lives. Every attempt needs to made to place siblings together and maintain family ties.

Kids in Crisis goal is protect children, provide shelter and when possible to reunite them with their family. According to the Connecticut statute, it states that "If temporary removal and placement of the child out of the home is determined to be essential, The Department will provide services to the family as may be necessary and seek to return the child to the family home, as soon as this action is deemed appropriate based on an assessment of the child's needs and the parent's willingness and ability to meet these needs."

To reduce the stay in any facility, systems must be in place for children to be returned to their families. There needs to be an increased coordination on the part of DCF with the community and agencies and an ongoing home base comprehensive plan to help increase the competency of the family. At present, there is a gap in this process.

If this bill is enacted, what will happen to this vulnerable population? Where will they go for emergency care and be in a safe environment?

If this bill is enacted, will there be enough skilled and responsible family placement homes available?

If this bill is enacted, it is possible that a best practice facility like Kids in Crisis will no longer be available.

These questions need to have answers. We must avoid adding more trauma to the lives of children.

Thank you.

Carole N. Greenberg, RN, LMFT